

order of birth stated.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH

State File No. 194
Registered No. _____

1. PLACE OF BIRTH

County Gila State Arizona
District or Township Christmas or Village _____
City _____ No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Jose. Romero If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? Yes 7. Date of birth May 28 1930
Month Day Year

8. FATHER
Full name Guillermo Romero
9. Residence (Usual place of abode) Christmas Arizona
If non-resident, give place and state.

10. Color or race Mexican 11. Age at last birthday 46 (Years)

12. Birthplace (city or place) Bisbee
(State or country) Arizona

13. Occupation
Nature of Industry Miner

14. MOTHER
Full maiden name Maria Mungarro
15. Residence (Usual place of abode) Christmas Arizona
If non-resident, give place and state.

16. Color or race Mexican 17. Age at last birthday 36 (Years)

18. Birthplace (city or place) ---
(State or country) Mexico

19. Occupation
Nature of Industry House wife

20. Number of children of this mother 10 (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 7
(b) Born alive but now dead 2
(c) Stillborn 1 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born alive 1.2 m. on the date above stated.
(Born alive or stillborn.)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature [Signature] Physician (Physician or Midwife).

Given name added from a supplemental report _____ Address Christmas Arizona

Month, day, year _____ Filed July 9, 1930 [Signature] Registrar

196-528-446